

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>File</i>		06-08-01
O.I.P.E. CLASSIFIER	<i>lv</i>		6-16-01
FORMALITY REVIEW	<i>CV</i>	875	8/2/01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	5/3/01
2	Y
3	Y
4	Y
5	Y
6	Y
7	Y
8	Y
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10	Y
11	Y
12	Y
13	Y
14	Y
15	Y
16	Y
17	Y
18	Y
19	Y
20	Y
21	Y
22	N
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
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